



Summer Tip Off 2010

NATIONAL BASKETBALL TOURNAMENT

Locations: Santa Fe Family Life Center (6300 N. Santa Fe, OKC)
and Transformation Fitness (14701 N. Kelly, Edmond)
(5 Maple Hardwood Courts—all air conditioned)

June 18, 19 & 20, 2010

Tournament Format: Four game guarantee
Pool Play—All teams advance to championship bracket

Entry Deadline: June 11, 2010

Entry Fee: \$200.00 per team

Boys Divisions

11u/5th grade
12u/6th grade
13/7th grade
14u/8th grade
15u/9th grade

16u/10th grade
*17u/11th grade
*Unsigned Seniors Welcomed
**Players must meet either age or
grade qualification for their division
(age as of 9/1/10 & grade as of 1/1/10)

Girls Divisions:

10u/5th grade
11u/6th grade
12u/7th grade
13u/8th grade
14u/9th grade

15u/10th grade
16u/11th grade
**Player must meet either age or
grade qualifications for their
division (age as of 1/1/10 & grade
as of 1/1/10)

*Proof of player eligibility must be available at each team's game to be provided by the coach.

Trophies to be awarded to the Champions in each division

For additional information, contact
Tournament Director: Gary Vick (405) 476-5072
Assistant Director Dana Ganschow (405) 749-1515
athletesfirstok1@hotmail.com
www.athletesfirst.com



Summer Tip Off 2010

NATIONAL BASKETBALL TOURNAMENT

Tournament Registration Form

Please Check Division:

- | | |
|---------------------------------|--|
| <input type="radio"/> 5th Grade | <input type="radio"/> 9th Grade |
| <input type="radio"/> 6th Grade | <input type="radio"/> 10th Grade |
| <input type="radio"/> 7th Grade | <input type="radio"/> High School Open |
| <input type="radio"/> 8th Grade | (unsigned Seniors welcomed) |

Please Check One: BOYS GIRLS

For multiple teams please make duplicate copies

Team Name _____

Coach _____

Main Contact _____

Address _____

City _____ **State** _____ **Zip** _____

Home Phone () _____ **Cell Phone** () _____

E-mail _____

To pay by credit card please fill out the following (501 C-3 Tax Deductible) Secure Web Site

Card Type Master Card Visa American Express Discover

Card Number _____ **Expires** _____

Mastercard/Visa 3-Digit Code _____ **AMX 4-Digit Code** _____ **Charges** _____

Name as printed on card _____ **Signature** _____

Cashier Check/Money Order (Attached) Payable to Performance Sports

Please Respond by:

Mail	6300 North Santa Fe
	Oklahoma City, OK 73118
E-Mail	athletesfirstok1@hotmail.com
Fax	(405) 840-1843

Additional Information Tournament Director Gary Vick (405) 476-5072
 Assistant Director Dana Ganschow (405) 749-1515